

STATE OF ALASKA DEPARTMENT OF FISH AND GAME

Fish Resource Permit Application

- "Print & Fill-in" Form -

A FISH RESOURCE PERMIT is required to take, possess, hold alive, or tag FISH AND THEIR EGGS (except goldfish and decorative tropical fish) FOR SCIENTIFIC OR EDUCATIONAL PURPOSES.

r ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '	se this form over again as a "blank for					
				<u>neowner'</u>	s Assn	
(Name of Applicant) (Organization or School)						
	hpoint Dr. Anchorage					
(typ	e in complete mailing address i	ncluding City	, State, an	d Zip Code)		
907-243-0			ron Qa	esalaska	net	
(your Telephone Nu			•	(Email Addre		
Campbe	II Lake Homeowner e name and address of the organ	<u>'s Assn</u>				
(type in the	e name and address of the organ	ization with v	vhich you	are under co	ntract)	
I am making applic	cation to capture fish of the fo	llowing speci	es and nu	mber for the	e specified	
	e: identify and release, measure	m			_	
• •	insport, hold alive, etc.):	,		•	, C	
Species	Species					
Common Name	Scientific Name	Life Stage	Number	Dispo	osition*	
CohoSalmor	O. Kisutch	fingerling	< 200	:dent:fy/ca	ount/measure	relace.
Chinoole Salmo	O. + shawytscha	į, v	4 100	tx	es is	1
Stickleback		various	350	1.7	ty ix	L 1
Slima Sculpin	Cottus cognatus	11	< 50	Ü	15 (A	9
DollyVarder		fingerline	<100	l r	<i>I</i>) />	, I
Sockere Salmon			4300	11	ii t	1 1
Blackfish	Dallia pectoralis	various	(200	ident: Fylo	ount/neasu	nol destr
					•	1
		1				
*For multiple campl	e locations give detail of specie	s and number	and dieno	eition in von	r etudy plan	
· -	- ,		^	-		
	its are only valid for dates wit			am requesti	ing this pern	nit
	eriod: (a new application is requ					
2009	From: (month and day)	nuary 1 December 31			3.1	
Year: (20 <u>১৭</u>)	From: (month and day)	•	To:	(month an	d day)	
I wish to obtain the	above fish [finfish, shellfish,	amphibians]	by means	of:		
						-
(Specify gear typ	aps, dipnets * e(s): minnow traps, hoop traps,	fyke nets, gil	lnets, dip	nets, spat col	lectors, etc.)	
from the following		. •	-	-	•	
	ump bell Lake , i.e., X River at latitude/longitu	de or ESE of	Pt Barroy	w or on Kod	iak Island et	
(Specify location(s)	, i.e., ze icivel at lantade/longita	uc, or hor or	I I, Dano	W, OF OHITCOU	ian isiaila, vu	U. j

The purpose of the activities for which a permit is being requested: (a brief purpose statement)	
Required by ADDR Dermit & Mitigation Monitoring Program	
Required by ADNR permit & Mitigation Monitoring Program (this area and other boxes will expand as you type) requirement	ts.
NOTE: A STUDY PLAN or RESEARCH PROPOSAL explaining the purpose and need,	
the objectives, and the procedures you will use must be included in/with this permit application:	
(Study Plan) Permit was posted earlier & The 5/8/08	Le ADNIR
Final disposition of collected specimens* not to be released live at the site of capture will be: was so land, Chinook, Sockeyes, Dolly Varden, Stickleback, a sculpin released. Blackt	is eye-ma
Loho, Chinook, Sockeyen, Dolly Warden, Stickleback, & sculpin released. Blackt	:=h
*(specimens may not be consumed, sold, traded, or bartered, or used in any commercial manner)	sed of a cal wast
The following people will participate in field collections under terms of this requested permit:	
Tom Kron	
Chris Gronning	
Chris Gronning Vohn Sparaga	

(If applicant is representing a corporation or institution, a certification of affiliation may be required which must be notarized and attached to this application).

(completed application must be submitted to):

Email Address:

Freshwater and estuarine environment collections (Division of Sport Fish):\
robert.piorkowski@alaska.gov

Marine environment collections (Division of Commercial Fisheries): sara.larsen@alaska.gov

or

Mailing Address:

Freshwater & estuarine environment collections:

Marine environment collections and permits involving propagation. :

resilwater & estuarme environment concetions

Alaska Department of Fish and Game Division of Commercial Fisheries

Attn: Bob Piorkowski Division of Sport Fish-RTS/FR Permits P.O. Box 115526

Alaska Department of Fish and Game

Attn: Sara Larsen P.O. Box 115526

Juneau, AK 99811-5526

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